

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Yoshiaki KATOU et al.
Title: DRIVE APPARATUS FOR HYBRID VEHICLE
Appl. No.: Unassigned
Filing Date: September 10, 2003
Examiner: Unknown
Art Unit: Unknown

UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Yoshiaki KATOU
Kouichi IIZUKA

Enclosed are:

- [X] Specification, Claim(s), and Abstract (25 pages).
- [X] Formal drawings (4 sheets, Figures 1-5).
- [X] Declaration and Power of Attorney (3 pages).
- [X] Assignment of the invention to JATCO Ltd
- [X] Assignment Recordation Cover Sheet.
- [X] Information Disclosure Statement.
- [X] Form PTO/SB/08 with copies of 2 listed reference(s).
- [X] Application Data Sheet (37 CFR 1.76).

☒ Claim for Convention Priority with 1 certified Japanese priority document.

The filing fee is calculated below:

| | Claims as Filed | | Included in Basic Fee | | Extra Claims | | Rate | | Fee Totals |
|---|--------------------|---|-----------------------------|---|-----------------|---|-------------------|---|---------------|
| Basic Fee | | | | | | | \$750.00 | | \$750.00 |
| Total | 20 | - | 20 | = | 0 | x | \$18.00 | = | \$0.00 |
| Claims: | | | | | | | | | |
| Independ | 3 | - | 3 | = | 0 | x | \$84.00 | = | \$0.00 |
| ents: | | | | | | | | | |
| If any Multiple Dependent Claim(s) present: | | | | | | + | \$280.00 | = | \$0.00 |
| | | | | | | | SUBTOTAL: | = | \$750.00 |
| <input type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above): | | | | | | | | = | \$0.00 |
| | | | | | | | TOTAL FILING FEE: | = | \$750.00 |
| Assignment Recordation Fee: | | | | | | + | \$40.00 | = | \$40.00 |
| | | | | | | | TOTAL FEE | = | \$790.00 |

☒ A check in the amount of \$790.00 to cover the filing fee and fee for recordation of Assignment is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.


Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date September 10, 2003

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By


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